

Resource Administration Script

Hi, I'm Karla Nation and I'm a Provider Specialist for the Department of Developmental Services. Today I will like to give you a brief overview of the Resource Administration role.

The sections we are presenting today contain resources that can be found on the DDS website. The Provider Gateway section of the website should contain all the information a provider needs to do business with the State of Connecticut.

Contact your Provider Specialist if you have questions. The Provider Specialist assigned to you is located on the Provider Assignment List. A link to the DDS Manual of Policies and Procedures is also located on the DDS website.

New providers are given a Provider Profile Form from the Provider Qualification Specialist to complete when becoming a qualified provider. It contains information about each qualified provider, including contact names, telephone numbers and email addresses, services the provider is qualified to provide and the towns they plan to serve. Individuals and families may contact you using this qualified provider list.

Profiles and the list of qualified providers can be found on the Provider Profile web page. Changes to provider information, i.e., contact names, phone numbers, email addresses, etc. should be submitted on the Provider Profile Correction Form.

Contact person(s) will receive all information from DDS and is responsible for inter-agency distribution. An agency can have up to five contact people: Executive Director, Main Contact, CFO, Provider Administrator, and Medicaid Contact.

DDS holds two meetings with providers each year: Performance/Quality Meeting and Fiscal Meeting. You will be notified via e-mail with the date and time of your scheduled meeting. Typically, fiscal meetings are held in May & June each year in the Prime Region with participation from other regions as appropriate. The focus of these meetings is fiscal issues, participant lists, FI issues, etc.

Quality Review Meetings are typically staggered throughout the year with the exception of May, June & July and held in the Prime Region with participation from other regions as appropriate. The focus of the fiscal meeting is on a review of Quality Improvement (QI) data and the Continuous Improvement Plan. This meeting will result in a recommendation for agency certification. QI data is forwarded to providers prior to the meeting for their review and analysis. Be sure to look at trends and issues. Incorporate these into the Continuous Improvement Plan.

Portability

Portability means that an individual has control over their supports and the money used to pay for the services they receive. That money is "portable." The individual can use their funds to

purchase services from any qualified provider they choose, or they may use those funds to hire their own staff.

The DDS Portability of Funds policy is located on the DDS website.

- If the individual isn't happy with supports, they can choose to change them.
- Portability Policy defines the process to be followed when an individual desires or needs a change in support plans which includes a change in provider.
- Procedure applies to all individuals who are funded by DDS
- Agency is given notification that individual is leaving program with date.
- Policy applies to home and work/day supports